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27752 7590 04/13/2004

THE PROCTER & GAMBLE COMPANY  
INTELLECTUAL PROPERTY DIVISION  
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Brian M. Bolam (Depositor's name)  
*[Signature]* (Signature)  
07/13/2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/052,321	01/18/2002	Mu-Mi Lim	CP-1225	1197

TITLE OF INVENTION: PRIMARY INTERMEDIATES FOR OXIDATIVE COLORATION OF HAIR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/13/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
HARDEE, JOHN R		1751	548-335500		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Brian M. Bolam  
Tara M. Rosnell  
3

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Procter &amp; Gamble Company

Cincinnati Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies 3

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**Company: The Procter & Gamble Company**  
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## **Comments:**

P&G Docket No.	CP-1225 (G-266ML)
Serial No.:	10/052,321
Filing Date:	01/18/2002
Conf. No:	1197

## **Attachments:**

- Issue Fee Transmittal
- Fee Address Indication Form